

CLAIMS ONLY							Application Number <b>10686271</b>	Filing Date
Applicant(s)								
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51	
2	1						52	
3	1						53	
4	Cancel						54	
5	1						55	
6	1						56	
7	1						57	
8	1						58	
9	1						59	
10	1						60	
11	1						61	
12	1						62	
13	1						63	
14	1						64	
15	1						65	
16	1						66	
17	1						67	
18	1						68	
19	1						69	
20	1						70	
21	1						71	
22	1						72	
23	1						73	
24	1						74	
25	1						75	
26	1						76	
27	1						77	
28	1						78	
29	1						79	
30	1						80	
31							81	
32							82	
33							83	
34							84	
35							85	
36							86	
37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
Total Indep	17						Total Indep	
Total Depend	22						Total Depend	
Total Claims	39						Total Claims	

BEST AVAILABLE COPY